New Hospital Application Process

Based on the ISDH rule promulgation process, the proposed revision of the hospital rules related to licensure fees has been approved by the Hospital Council, and now awaits final approval by the Attorney General and Governor's Office.

Contingent upon approval of the hospital rule, new applications and annual renewals of licenses beginning in June 2004 will include the following licensing fee categories:

"Annual [hospital] renewal fees will be due upon application, as provided by 410 IAC 15-1.3, for an annual renewal of a hospital's license based upon total operating expenses as reported to the state department of health on the **most recently filed hospital fiscal report (State Form 49520)** required by IC 16-21-6-3. The fee schedule shall be as follows:

Total Operating Expenses	Fee
$0-$49,999,999	$1,000.00
$50,000,000-$99,999,999	$2,000.00
$100,000,000-$199,999,999	$3,000.00
$200,000,000-$299,999,999	$4,000.00
$300,000,000 and above	$5,000.00

ISDH is revising the current licensing form, with plans to mail the revised form in May 2004 to all hospitals whose licenses will expire in June 2004. In absence of a new licensing form, a cover letter will be sent requesting that all applications include a check or money order payable to the ISDH. This address to return the application and license fee is: Indiana State Department of Health, Attention: Cashier, 2nd Floor, 2 North Meridian Street, Indianapolis, Indiana 46204-3003.

It is expected that the fee structure will be based on the total operating expenses performed in fiscal year 2002 or 2003. Please note that 2002 total operating expenses reported by your hospital are included in this packet.

Inside this issue:

Food Handler Certificate

  As you may be aware, the Indiana legislature adopted IC 16-42-5.2 which provides for mandatory certification of at least one person per food establishment who oversees food safety operations within the establishment. ISDH has adopted 410 IAC 7-22, effective January 1, 2005, to ensure all food providers have staff with specific areas of food safety knowledge as essential components in the prevention of food-borne disease. Hospitals (and all entities listed as part of the license) are exempt from these requirements but food service facilities leasing space in hospital but not on the hospital license (such as McDonalds) will have to meet these requirements. Links to the rules and a list of training institutions can be found at hhh://www.in.gov/isdh/ regsvcs/foodprot/foodhandler/certificationrule.htm

ISDH Infection Control Guidelines

  Hospitals may desire to review the ISDH guidelines for the Prevention and Management of MRSA, VRE, and VISA/VRSA in Indiana Health Care at http://www.in.gov/isdh/ professional/ pmaoariihc04.htm

2002 Hospital Financial Profile

  Based on fiscal year 2002 reporting, ISDH will release the 2002 Hospital Fiscal Reports at the ISDH Web site in the summer of 2004. A summary of the statewide comparative statistics is seen below:

  In 2002, the average acute care hospital will receive $76.6 million dollars in revenue (after deductions) as payment for services, and will spend $75.9 million dollars to pay for salaries for hospital employee, interest payments, and other expenses.

  In total, the 130 hospitals will receive $10.4 billion dollars (after deductions) as payment for services and will spend $9.8 billion dollars to pay for expenses (See Table A).

TABLE A
ANNUAL TOTAL EXPENDITURES, INDIANA, 2000 – 2002
(Values shown in hundred thousands)

FISCAL INDICATOR	2000	2001	2002
Total Gross Patient Service Revenue	$13,571.7	$15,535.7	$17,319.7
Total Deductions from Revenue	$5,175.6	$6,293.7	$7,355.4
Total Operating Revenue	$8,772.2	$9,789.3	$10,437.7
Total Operating Expenses	$8,299.0	$9,354.4	$9,870.0
Total Net Gains over Losses	$612.7	$487.4	$449.3
No. of hospitals w-operating margins	37	35	26
7. No. of Hospitals	123	130	130

                                                        * Data in hundred thousands ($000,000)

Hospital Capacity and Readiness

The Health Resources and Services Administration (HRSA) cooperative agreement under the Bioterrorism Hospital Preparedness Program (HBPP) provided $10,270,929.00 for Hospital BT Preparedness Planning for 2003-2004. Of that amount, approximately $9,300,000.00 will be made directly available to hospitals to spend on the hospital's needs that are coordinated with its district plan. Like last year, the money will be distributed based on the hospital's reported 2002 ED visits.

Contracts are being this month to 144 eligible Acute Care Hospitals and the 2 VA hospitals. The deliverables for this year are:

- The names, phone numbers and e-mail addresses of the person and his/her back up who represent your hospital in District level planning meetings.
- The names, phone numbers and e-mail addresses of your hospital personnel who can be contacted by ISDH in the following areas a.) Emergency Department, b.) Infection Control, c.) Trained Smallpox Vaccinator.
- Explicit delivery instructions for the location of the loading dock where SNS supplies should be received if your hospital becomes a "Treatment Center" during a large-scale emergency.
- Information about the number of staff (and their family members) designated to receive mass prophylaxis in the early hours of an event involving an infectious agent.
- A diagram showing where your hospital will set up a mass prophylaxis clinic for the persons identified in #4 above. The diagram should include:

  - Controlled client entrance and exit for persons receiving prophylaxis.
  - Rooms for video/client education.
  - Rooms for medical screening, areas set aside for first aid and for mental health consultation.
  - Tentative locations of client stations for immunization or for receipt of antibiotics.
  - Expected pattern of client flow indicated by dotted lines and directional arrows through the stations for educational material, medical screening, diversion of persons who are symptomatic or have been exposed, receipt of prophylaxis.
  - Tentative locations for clinics support stations (form collections, data entry, supplies).

- Interest in participating in a Web-based system to monitor hospital capacities during emergencies.
- Interest in participating in the National Disaster Medical System.
- Interest in participating in the ISDH pilot Syndromic Surveillance Project.
- Opinion on the feasibility of adding epidemiological questions to medical history-taking during infectious disease outbreaks.
- Location of on-site landing zone for helicopters for those hospitals having this capacity.
- Your hospital's contribution to the HRSA Benchmark Requirements for your District.
- A budget that reflects the funding needed to improve your hospital's own capability and that of your district to meet the HRSA benchmarks.

Completion of these deliverables will be required before the hospital may return the voucher for payment of its share of the funds.

Regulatory News

An amendment to the hospital rules (410 IASC 15.1) to update the life safety code from the 1985 to 2000 standards was approved by the Executive Board on March 19, 2004, and now awaits final approval by Governor's Office.

Effective January 1, 2004, CMS has indicated that critical access hospitals (CAH) may operate up to 25 beds as either acute or swing beds. CAH reimbursement will be 101% of reasonable costs. (Source: http://www.cms.hhs.gov//manuals/pm trans/R68CP.pdf) In March 2004, there were 21 CAHs in Indiana.

CMS Voluntary Quality Improvement Data

As of March 4, 2004, there were 77 hospitals voluntarily reporting data on all patients for a total of 10 quality measures that related to three serious medical conditions – acute myocardial infarction, heart failure, and pneumonia.

Reporting hospitals may receive a full market basket payment update in fiscal year 2005. For future information, go to http://www.cms.hhs.gov/media/press/release.asp?counter=955

Hospital Service Reporting

Under IC 16-21-6-3, Indiana hospitals must report their set-up beds, discharges, patient days and total charges.

The request for annual 2003 utilization information is attached with results to be completed and transmitted to ISDH by June 1, 2004.

The posting of 2002 hospital services is posted at http://www.in.gov/isdh/regsvcs/acc/services/2002/index.htm

"The Indiana State Department of Health serves to promote, protect, and provide for the public health of people in Indiana."

Jobs in public service offer many rewards and challenges. If you are interested in a public service career, the Indiana State Department of Health (ISDH) offers a great work environment and the opportunity for personal growth.

The ISDH currently has employment opportunities for nurses, laboratory, and information technology staff as well as a variety of other dedicated professionals.

The ISDH offers a flexible work schedule, a 37.5 hour work week, excellent benefits, and generous paid leave. We rarely require overtime, weekends, or holiday work.

Find out what opportunities await you by checking

http://www.in.gov/isdh/about/hr or http://www.in.gov/jobs/stateemployment/jobbank.html

Equal Opportunity Employer

Indiana State Department of Health

Hospital Information on ISDH Web Site

♦ Directory (with quarterly updates)
♦ Laws/Rules/Regulations (USA & IN)
♦ Licensing Form
♦ Reports
♦ Links to organizations